

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	
Estimated average	je burden
hours per respon	se 16,00

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Prefix	Serial
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	1

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Common Shares Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) [Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	07066139
I. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Atlanta Gold Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
	6-777-0013
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Mining exploration and development	PROCESSE
Type of Business Organization	FILOCH
✓ corporation ☐ limited partnership, already formed ☐ other (plea ☐ business trust ☐ limited partnership, to be formed	se specify): JUN 0 7 2007
Month Year Actual or Estimated Date of Incorporation or Organization: O3 OO Actual Estimate Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIAL
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or S.	ection 4(6), 17 CFR 230.501 et sea, or 15 U.S.C.

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall-be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA			٠,
2. Enter the information	requested for the fo			<u> '</u>	<u></u>	.,
		ssuer has been organized v	within the past five years;			
				of, 10% or more	of a class of equity securities of the	issuer
	-	_	f corporate general and ma			
		of partnership issuers.	6		, ,	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or	-
				•	Managing Partner	
Full Name (Last name first, Baird, Bill	if individual)				-	
Business or Residence Addi c/o Atlanta Gold Inc., 12						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, Gray, James	if individual)		***************************************	···		
Business or Residence Addr c/o Atlanta Gold Inc., 125	•	Street, City, State, Zip Coly ly Avenue, Toronto, O	•	.		•••
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, Folk, Allan	if individual)					
Business or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)			
c/o Atlanta Gold Inc., 125	50 - 155 Universi	ty Avenue, Toronto, O	ntario M5H 3B7			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	[Director	General and/or Managing Partner	
Full Name (Last name first,	if individual)		 -	·	,	
Berentsen, Eric						
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)			
c/o Atlanta Gold Inc., 12	50 - 155 Univers	ity Avenue, Toronto, C	Intario M5H 3B7			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, Jipangu Canada Inc.	if individual)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Business or Residence Addre 3-6-9 Kita-Shinagawa, S	•	Street, City, State, Zip Co okyo 140-001 Japan	ode)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first,	f individual)					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, i	f individual)					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	de)			

					В. 1	NFORMAT	ION ABOL	T OFFERI	NG			,	
1.	Has the	issuer col	d, or does t	ha iccuar i	ntend to co	ll to non o	ooraditad i	nuactore is	thic offer	ina?		Yes	No
••	mas me	133001 301	a, or does t			n Appendix				•		Ŀ	x
2.	What is the minimum investment that will be accepted from any individual?									s			
_										Yes	No		
3. 4.	,												
4 .	commis If a pers or state	ssion or sim son to be lis s, list the na	ilar remune ited is an as:	ration for s sociated pe roker or de	solicitation erson or age ealer. If me	of purchas ent of a brol ore than fiv	ers in conne ker or deale e (5) persor	ection with r registered ns to be list	sales of se d with the S ed are asso	curities in t SEC and/or	he offering. with a state ons of such		
Ful	l Name (Last name	first, if ind	ividual)				·					
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Zip Code)		<u> </u>				
Nar	ne of As	sociated B	oker or De	aler				<u> </u>					
Stat	tes in W	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		•	•			
	(Check	"All States	or check	individual	States)	***************************************			********	***************************************		☐ Al	1 States
	AL IL MT RJ	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL Ml OH WV	GA MN OK WI	HI MS OR WY	MO) PA PR
Full	Name (Last name	first, if ind	ividual)								-	
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nan	ne of Ass	sociated Br	oker or De	aler									
Stat			Listed Has										
	(Check	"All States	or check	individual	States)	***************************************	**************			***************************************		☐ AI	1 States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MJ OH WV		HI MS OR WY	MO PA PR
Full	Name (Last name	first, if indi	vidual)	_		· · · · · · · · · · · · · · · · · · ·						
Bus	iness or	Residence	Address (1	lumber an	d Street, C	ity, State, 2	Zip Code)			· · · · · · · · · · · · · · · · · · ·	<u>,</u>		
Nan	ne of Ass	sociated Br	oker or Dea	aler									,
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers					<u> </u>	
	(Check	"All States	" or check	individual	States)	•••••		·····		•••••		☐ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	MN OK	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \[\] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	5	_ s
	Equity		
	☐ Common ☐ Preferred	-	
	Convertible Securities (including warrants)	\$	s
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	'	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	1	C § 153,000.00
	Non-accredited Investors		
	Total (for filings under Rule 504 only)	· ·	· · · · · · · · · · · · · · · ·
	Answer also in Appendix, Column 4, if filing under ULOE.	•	<u> </u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		
	Regulation A		
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	[2	C\$_50.00
	Printing and Engraving Costs] \$
	Legal Fees		C\$ 1,000.00
	Accounting Fees		
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		j s
	Other Expenses (identify) Listing fee for Toronto Stock Exchange		C \$ 100.00
	Total	_	C \$ 1,150.00

	C. OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
		ring price given in response to Part C — Question 1 - Question 4.a. This difference is the "adjusted gross		C\$
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[] S	_ 🗆 \$
	Purchase of real estate	[] S	_ 🗆 \$
	Purchase, rental or leasing and installation of ma and equipment	chinery []\$	s
	Construction or leasing of plant buildings and fac	cilities] s	🗆 \$
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)	lue of securities involved in this ets or securities of another	7 \$	□\$
			_	_
	Other (specify):] \$	<u>\$ 136,850.00</u>
	· · · · · · · · · · · · · · · · · · ·] s	_ 🗆 \$
	Column Totals	<u>.</u>	s_0.00	\$ 151,850.00
	Total Payments Listed (column totals added)		s_ <u>_</u> 1	51,850.00 C
		D. FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fu	e undersigned duly authorized person. If this notice rnish to the U.S. Securities and Exchange Commiss credited investor pursuant to paragraph (b)(2) of R	ion, upon writt	
İss	er (Print or Type)	Signature A A	ate	
Atl	anta Gold Inc.	Wyckaud	May 22, 2007	
Nai	ne of Signer (Print or Type)	Title of Signer (Print or Type)	,	
Bill	Baird	Interim Chie Executive Officer		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE			
1.		0.262 presently subject to any of the disqualifica		Yes	No 🔀
		See Appendix, Column 5, for state response			
2.	The undersigned issuer hereby underta D (17 CFR 239.500) at such times as	akes to furnish to any state administrator of any st required by state law.	ate in which this notice is fi	led a no	tice on Forn
3.	The undersigned issuer hereby under issuer to offerees.	takes to furnish to the state administrators, upor	n written request, informati	on furn	ished by th
4.	limited Offering Exemption (ULOE)	at the issuer is familiar with the conditions that of the state in which this notice is filed and unde establishing that these conditions have been satis	rstands that the issuer clain		
	per has read this notification and knows t thorized person.	the contents to be true and has duly caused this not	ice to be signed on its behal	f by the	undersigned
ssuer (Print or Type)	Signature • • •	Date		
tianta	Gold Inc.	Whisaud	May 22, 2007		
lame ()	Print or Type)	Title (Print or Type			

Interim Chief Executive Officer

Instruction:

Bill Baird

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX					
1	Intend to non-a investor	2 I to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ									:	
AR										
CA			-			,				
со	-									
СТ										
DE									· · · · · · · · · · · · · · · · · · ·	
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LA							-			
МЕ										
MD										
МА										
МІ			:							
MN										
MS										

APPENDIX

1		2	3		5 Disqualification						
	to non-a	to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
мо											
мт			-								
NE											
NV		×	C\$153,000	1	\$153,000.00	0	\$0.00		×		
NH								:			
NJ											
NM											
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				APP	ENDIX					
1		2	3		4					
	to non-	d to sell accredited rs in State 3-ltem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR									Ţ.,	

